

U.S. Department of Justice
United States Marshals Service

PROCESS RECEIPT AND RETURN
See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF JAMES E. SHELTON DBA FINAL VERDICT SOLUTIONS		COURT CASE NUMBER 1:17-mc-8-NLH	
DEFENDANT CAPITAL ADVANCE SOLUTIONS, LLC		TYPE OF PROCESS Writ of Execution	
SERVE AT	NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN CAPITAL ADVANCE SOLUTIONS, LLC		
	ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code) 8025 Black Horse Pike Suite 400, West Atlantic City, NJ 08232		
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW		Number of process to be served with this Form 285	1
James E. Shelton 316 Covered Bridge Road King of Prussia, PA 19406		Number of parties to be served in this case	1
		Check for service on U.S.A.	
SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service):			

Fold

Fold

Alternate address: 1715 State Rt 35 Suite 302, Middletown, NJ 07748 (corporate headquarters)
Telephone Numbers: 732-865-8050 (corporate number), 1-866-995-7272 (secondary number).
Charles Betta, CEO: 732-291-5375

Signature of any other Originator requesting service on behalf of: <i>James E. Shelton</i>	<input checked="" type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER 484-626-3942	DATE 4/6/17
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SPACE BELOW FOR USE OF U.S. MARSHAL ONLY-- DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated. (Sign only for USM 285 if more than one USM 285 is submitted)	Total Process 1	District of Origin No. 450	District to Serve No. 450	Signature of Authorized USMS Deputy or Clerk <i>[Signature]</i>	Date 4/12/17
I hereby certify and return that <input checked="" type="checkbox"/> I have personally served, <input type="checkbox"/> I have legal evidence of service, <input type="checkbox"/> I have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. shown at the address inserted below.					
<input type="checkbox"/> I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)					
Name and title of individual served (if not shown above) <i>Brian Strahl manager</i>				<input type="checkbox"/> A person of sui able age and discretion then residing in defendant's usual place of abode	
Address (complete only different than shown above)				Date 5/2/17	Time 2:16 <input type="checkbox"/> am <input checked="" type="checkbox"/> pm
				Signature of U.S. Marshal or Deputy <i>A. Leone</i>	
Service Fee 195-	Total Mileage Charges including endeavors 63.28	Forwarding Fee	Total Charges 258.28	Advance Deposits	Amount owed to U.S. Marshal* or (Amount of Refund*) \$0.00

REMARKS:

U.S. Deputy Marshal Leone called Mr. Shelton and informed him that he would need a Seizure order to take possession of property etc.

DISTRIBUTE TO:

1. CLERK OF THE COURT
2. USMS RECORD
3. NOTICE OF SERVICE
4. BILLING STATEMENT*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.
5. ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS MAY BE USED